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ABSORBENT GLANDS AND SPLEEN.

On some Morbid Appearances of the Absorbent Glands and Spleen.

By D. HODGKIN.

If there be any accounts in books relative to morbid alterations of structure like those about to be described, they can be but little known; the author knows of none, and there is the more room and apology for the present observations.

1. The first case deserving of notice is that of Joseph Sinnott, nine years of age, a patient in Guy's Hospital, admitted laboring under ascites and effusion into the prepuce and scrotum.

Inspection.—Serous effusion under the arachnoid and within the ventricles. Substance of the brain soft and flabby. Pleura much affected with adhesions; fluid in the cavity. A few tubercles in the lungs. Heart healthy. Peritoneum had been recently and extensively inflamed; a sero-purulent effusion in the cavity. Viscera overlaid generally with a soft light-yellow coagulum. The mesenteric glands enlarged—one or two considerably so, equaling in size a pigeon's egg, of semicartilaginous hardness, and streaked with black matter. Liver pretty natural. Spleen large, and containing numerous tubercles. Kidneys mottled, of a light color. A continuous chain of much-enlarged, indurated, absorbent glands, accompanied the aorta throughout its course, closely adherent to the bodies of the vertebræ, and extending along the sides of the iliac vessels, so far as they could be traced in the pelvis; none of these vessels had been sufficiently compressed to occasion a coagulation of the contained fluids.

2. The next case is that of Ellenborough King, aged ten years, a patient of Dr. Bright. Until thirteen months ago this child had been healthy; a tumor was then observed in the left hypochondrium, which, under treatment, was very considerably reduced; the glands on both sides of the neck were swollen, the abdomen was somewhat distended, and there was considerable œdema of the scrotum.

Inspection.—The glands in the neck, when cut into, exhibited a firm cartilaginous structure, without any appearance of softening or suppuration. The glands of the vessels in the chest were in the same state. The lungs generally healthy; there was a considerable quantity of fluid in the peritoneal cavity. The glands accompanying the aorta, the splenic

artery, and the iliacs, were as those of the neck. The spleen was enlarged to four times its natural size, studded with tubercles, and presenting the same structure as the glands just mentioned.

3. William Burrows, aged 30, admitted for scrofulous ulcer in the axilla and neck; had been previously in the hospital for secondary symptoms, which were supposed to have been treated with large quantities of mercury. Before he died, abdominal dropsy had made its appearance.

Inspection.—The cavity of the chest contained about a pint of serum. Heart small and flabby; the liver of a shrunken, irregular shape, indurated, pale, and pervaded with a substance of a white, hard, tuberculous character. It appeared to Dr. Hodgkin, that the liver was in that state which is almost peculiar to those who have labored under a cachectic condition from mercury. The spleen twice its usual size, unusually firm, and, when cut into, exhibited a dense, dark-red, homogeneous structure. Some of the mesenteric glands much enlarged, and filled with white deposit; almost all the other glands of the trunk were similarly affected.

4. Thomas Westcott, aged 50, presented a great enlargement of nearly all the absorbent glands within reach of examination, but more especially of those in the axilla and groins.

Inspection.—The glands of the axilla proved the larger the deeper they were seated; when cut into, they appeared of a light white color, with very few vessels; in consistence, they very much resembled fungoid tumors. The glands in the groin of a similar character; the alteration in this case seemed to consist rather in an interstitial deposit, from a morbid hypertrophy of the glandular structure itself, than of a new or adventitious growth. The glands about the abdominal aorta and iliac arteries were as those in the preceding cases. Liver very large. Spleen at least nine inches long, five broad, and proportionately thick; its structure consisting of an almost infinite number of small white globules, appearing to arise from deposits in the cellular tissue of the organ.

5. In the next case, which was that of a middle-aged man, the last urgent symptoms were referable to the chest.

Inspection.—The glands of the neck, and those near the upper part of the thyroid cartilage, were very much enlarged. The pleuræ exhibited traces of recent inflammation. A large quantity of serum in the abdomen. The liver remarkably large, weighing upwards of seven pounds; the acini somewhat enlarged, but not fatty, as it was at first supposed. Spleen four or five times its natural size, but it contained no tubercles; the cellular tissue, however, was more conspicuous than usual in the intestines of the parenchyma. The absorbent glands about the aorta were all enlarged; some of them the size of a pullet's egg.

6. Thomas Black, aged 50, was affected with swellings of the neck and axillæ; his abdomen was greatly distended, and his breathing difficult. On examining his body, in both chest and abdomen the absorbent glands about the great vessels were enormously enlarged.

The enlargement of the glands, both in this and the preceding cases, appears to have been a primitive affection of these bodies, rather than the result of an irritation propagated to them from some other inflamed structure. Their enlargement is unattended with pain, heat, or any of the other symptoms of inflammatory action: nor is it accompanied by

any alteration in the surrounding tissues, or by a disposition to the production of pus. Notwithstanding the different characters which the enlargement in question may present, it appears nearly in all cases to consist of an uniform texture throughout, rather the consequence of a general increase of the whole gland than of a new structure displacing the original one, as is the case when ordinary tuberculous matter is deposited in these bodies.

The state of the spleen, too, is very remarkable, inasmuch as in all the preceding cases but one, it was found diseased, and in some of them thickly pervaded with bodies in structure resembling the diseased glands. Now, although in human spleens no glandular tissue is distinguishable, in those of some inferior animals a multitude of minute bodies exist, which appear to be of that nature. Malpighi, indeed, considered the acini of the spleen to be glands. And Dr. Hodgkin conceives, that if there be, as there appears to be, a close connection between the derangement of the glands and that of the spleen, the latter is a posterior effect, and thus may not always have been produced before the patient is carried off. In further confirmation of this view, he appeals to the pathological collection of Dr. Carswell, among which, having accidentally found a drawing of an immense spleen, loaded with tubercles, like those above described, he was agreeably surprised by the sight of another drawing, of greatly enlarged glands of the neck, axilla, and groins, from the same subject. Dr. Carswell called it a case of cancer cerebriformis of the glands and spleen, and his account of it was to this effect:—The man in whom the morbid appearances were found, had been a patient at the Hôpital St. Louis, Paris. He was between 30 and 40 years of age, and had these glandular swellings apparently for three or four months, without pain, and with little inconvenience. But a short time before his admission he felt a difficulty in swallowing, which had at length come to that height that he could take no food whatever. He lived only two days, in great suffering. Here an account of the examination of the body was given from Dr. C.'s notes, and intended to be illustrated by his unrivaled drawings; but owing to an accident the latter had not come to the society. The account tallied most exactly with Dr. Hodgkin's observations already given; but the Doctor did not agree with his friend Dr. C. in applying to these enlargements the appellation of "cerebriform cancer." In one case, indeed, Dr. Hodgkin had likened the growths to fungoid structures, but a closer examination detected abundant difference.

Besides the preceding instances from the dead, the author has met with similar examples of diseased or altered glands among the living. A Jew, between 40 and 50 years of age, came under his observation with the glands of the neck prodigiously enlarged, forming smooth ovoid masses, unaccompanied by inflammatory symptoms or thickening of the surrounding cellular structure. Those of the axillæ and groin were in the same state. There was no appearance of dropsical effusion about him. In another case, that of an emaciated child, an out-patient of Guy's Hospital, similar appearances were observed.

In conclusion, Dr. Hodgkin confessed that he had nothing to offer with regard to treatment, either curative or palliative. Most of the patients had only sought relief when the disease had reached an advanced

and hopeless stage ; and in the case of the Jew, the cascarrilla and soda, and the iodine, appeared to be productive of no advantage. At an earlier period of the complaint, the indications would seem to be, to increase the general vigor of the system, to protect them from exposure to cold and inclement weather, to employ iodine externally, and internally to push the use of the caustic potash as far as circumstances might render it allowable.—*London Medical Gazette.*

BRONCHIAL AFFECTIONS OF CHILDREN.

On the Treatment of the Bronchial Affections of Children. By MARSHALL HALL, M.D. F.R.S.E. &c.

I HAVE seen so many deplorable results from the undue employment of bloodletting, and so many happy effects from the use of ipecacuanha in emetic doses, in the bronchial affections of children, that I think it highly important to bring these two subjects before the profession.

According to my experience, bloodletting is ill borne in the bronchial affections of infants. The little patients soon become pale, with glossy cheeks, half-closed eyelids, slight torpor, and a very frequent pulse.

With these symptoms, the bronchial affection is frequently little or not at all improved. There is an undiminished tracheal and diffused bronchial rattle, and frequently a husky voice and croupy cough.

Such cases have been particularly frequent recently. One of the most interesting which I have witnessed, occurred in the little infant of Mr. Wright, surgeon, Howland street, four months old. One leech only had been applied, but it had blanched the countenance, and induced the peculiar waxen hue of the cheeks, so significant of exhaustion. There was slight torpor, and the eyes were only partially closed. There was unrelieved diffused bronchial rattle, and an alarming croupy cough. Further depletion was inadmissible. The case was treated by five-grain doses of ipecacuanha, in the manner about to be described, with the most marked immediate benefit and the happiest result.

In another case, of an infant six months old, in which four leeches had been applied, the pulse had risen to 190 ! A truce from exhausting measures *permitted* the pulse to subside. The infant recovered without the further detraction of blood.

My object, however, is not to detail cases, but to give the general result of my experience. This is, that bronchitis in children neither bears nor requires much bloodletting ; and that such bloodletting is not the remedy for bronchitis.

On the other hand, the good effects of repeated emetic doses of ipecacuanha are so striking and so immediate as to leave no doubt of the efficacy of this remedy in this particular case.

In the first place, the mere effect of vomiting, which is first an effort of expiration, and finally full expiration itself, relieves the upper parts of the bronchial tubes of the accumulated mucus.

In the next place, the effect of nausea in subduing the powers of the circulation, and especially of the capillary circulation, is quite remarkable, whilst this effect, being unattended by exhaustion, is totally free from danger.

It is probable, too, that ipecacuanha produces an effect upon the bronchial membrane similar to that observed on the skin. The secretion of mucus succeeds to a state of dryness, and the mucus itself is of less tenacity and easier of expectoration.

However, the rationale apart, I may give the result of my experience in general terms, and say that of all our remedies for bronchitis in children, repeated emetic doses of ipecacuanha, after moderate bloodletting, is the most efficacious. In little infants, five grains may be given and repeated every three, four, or six hours. The dose must generally be augmented to ten or fifteen grains, especially in older children.

To the ipecacuanha I have always added castor oil, in the intervals of sickness.

Blisters and fomentations to the chest are also highly advantageous.

But the principal object of my present communication is to point out the danger and inefficiency of bloodletting, and the extreme value of ipecacuanha, in this particular disease of children. Bloodletting, to be safe, must be administered cautiously. The ipecacuanha, to be efficacious, must be administered in fuller and more repeated doses than those generally prescribed. I have repeatedly known a single emetic dose of ipecacuanha subdue a recent bronchitis; and I have known repeated doses subdue the most inveterate. These repeated doses are not attended by the slightest risk. Let the nausea and the vomiting subside, and the disease will frequently be found to be perfectly removed, whilst the powers of the system are unimpaired. Few remedies of such powers are so free from danger, in the feeble and tender age of infancy. If the disease be obstinate, the remedy may be repeated until it *does* prove efficacious.—*lb.*

SCALDING OF THE THROAT.

A Case of Scalding of the Throat, in a Child, from drinking boiling Water, cured by opening the Jugular Vein. By Mr. G. O. HEMING, Member of the Royal College of Surgeons.

MR. EARLE'S interesting lecture has brought to my mind a case of the croupy affection, induced in children by drinking hot water, in which the use of bloodletting was distinctly and eminently advantageous. It may, therefore, form a useful addition to the cases placed on record by Dr. Marshall Hall, Mr. Stanley, and Mr. Earle.

John Noyes, aged two years and a quarter, was brought to me, about five months ago, by his father, who stated, that, seven hours previously, he had drunk some hot water from a tea-kettle.

The little boy was breathing with much difficulty, and the sound produced by respiration was similar to that which takes place in croup. There was an incapability of swallowing, and he seemed to suffer great pain.

I bled him from the jugular vein, to a state approaching syncope. The breathing instantly became considerably relieved. A cold lotion was recommended to be kept constantly applied to the throat, and, as he could not swallow, an injection was given to act upon the bowels.

Four or five hours afterwards I went to see him, accompanied by Dr. M. Hall (whose paper on the subject I had read some years before, in the Medico-Chirurgical Transactions), with the expectation that the child might require the operation of tracheotomy; but we were agreeably surprised to find that, since the bleeding, the respiration had progressively improved, and the peculiar noise had entirely subsided. The little patient was quite well in a few days.

I would here just remark, that I have seen many cases of croup—one within the last few days—where leeches had been numerous and repeatedly applied without affording any relief; but the good effect of taking blood from the jugular vein to approaching syncope, was evident immediately, and apparently saved the lives of the little patients. From the case related by Mr. Earle, it is quite evident how serviceable the loss of blood may be in such cases; as even the application of the leeches arrested the disease and afforded temporary benefit. In croup, the loss of blood is borne well, and one might suppose that the sensibility of the stomach may be in some degree diminished, as it requires larger quantities of ipecacuanha, or emetic tartar, to produce vomiting in this disease. This observation in regard to emetics, is also applicable to bronchitis in children.—*Ibid.*

For the Boston Med. and Surg. Journal.

REMARKS UPON MALIGNANT CHOLERA.

"Malignancy is a state of the system in which there is a peculiar deficiency of vitality, attended with an insusceptibility to the curative action of ordinary remedies, in ordinary doses and quantities."—[American Medical Recorder, April 1828, page 292.]

If this definition of malignancy is correct, it would seem that there could be very little difficulty in accounting for the excessive mortality which has occurred both in Asia and Europe, during the prevalence of epidemic cholera. There is certainly a very striking analogy between the *cholera* of the eastern continent, and the *typhus syncopalis* which at various times, during the last twenty-six years, has prevailed in many parts of New England, and in other States. Whoever will consult Dr. Thacher's Modern Practice, and the Philadelphia editions of Gregory's Practice, as well as Dr. North's Treatise on Spotted Fever, and various practical works to be found in American pamphlets and periodicals, will soon be convinced, that the two diseases must either be varieties of the same species, or more probably species of the same genus, requiring obviously the same treatment in general, though unquestionably demanding variations according to particular circumstances. It is therefore proper to ascertain what has been the most successful treatment of American practitioners, in their disease. With the utmost confidence it may be stated, that in no instance has an epidemic of *typhus syncopalis* been successfully treated, except upon the principle mentioned in the preceding definition of malignancy.

From the first appearance of *typhus syncopalis*, at Medfield, in 1806, (then called *spotted fever*,) it was discovered, that ordinary remedies,

in ordinary doses and quantities, would make no impression upon a bad case. Opium, essential oils, capsicum, aromatics, musk, alcohol, ether, external heat, rubefacients, epispastics, &c. if of any avail, must usually be employed in perhaps three or four fold frequency and quantity beyond what they are demanded in common complaints. The success of this energetic treatment, notwithstanding such a formidable disease must always be attended with some fatal cases, has been so great, that typhus syncopalis has now lost most of its terrors. Nine cases out of ten, and in many instances a much greater proportion of the patients, ultimately recover. It is believed, judging from the aggregate of the returns as far as received, that about a third of all the cases of cholera, during the present epidemic in Europe, have terminated fatally. If the statements which I have seen of the general practice are correct, and fair specimens of the ordinary treatment, the wonder is at the recoveries, and not at the comparative mortality. It is very evident, that a much greater proportion of the American cases would have failed, under such a relatively inert management as that directed by the most distinguished European writers, in their present epidemic.

It is unnecessary here to enter into further discussion of the subject. It is hoped that our physicians will consult the works which have been mentioned, and the other various essays which are referred to in those compilations. Those physicians who have been familiar with typhus syncopalis, pneumonia typhodes, and other malignant diseases, in their most sinking and malignant forms, can certainly be in no doubt as to the kind and degree of practice which is demanded in epidemic cholera. They must all have repeatedly seen cases as rapid and severe, which would have undoubtedly proved equally fatal, had it not been for an extremely active, energetic, and persevering treatment. CELsus.

A CASE OF HEMICRANIA.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—The remarks contained in your last on that singular affection of the head most commonly known by the name of hemicrania, called to my mind a case that I had recently under treatment; a case that presented few if any of the symptoms there enumerated, but which may yet be denominated a species of hemicrania.

A young lady offered herself as a patient, from whose general appearance her errand would never have been suspected. Though not of a sanguine temperament, her complexion was florid, and her countenance and general appearance were those of perfect health. The bowels were in good order, and all the functions seemed to be unimpaired. Her complaint was a severe pain, frequently recurring, on the whole left side of the head. It usually came on at night, and was not confined to the seat of any nerve, but equally diffused over the whole side of the cranium. The pain was usually severe, steady and not by tics, lasted about an hour, and then went off without treatment, leaving the parts, and the upper extremity of the same side, in a state of numbness that generally yielded to friction.

These paroxysms would often occur in the day time, but most frequently in the night, and they produced no permanent impression on the general health. The pulse was full and slow—the tongue not coated, but of a dirty brown color—the appetite tolerable, but not so much less than usual as to have excited observation—and her habits were sedentary.

In this instance, as I believe in most others, the hemicrania was wholly symptomatic of disorder in the stomach, was thoroughly and permanently cured by a powerful emetic, followed by a dose of compound infusion of senna and gentian, and a short course of tonics. It was not thought advisable to trouble the patient with blisters or narcotics; and as far as my experience goes, in most forms of neuralgia, medicines of the latter classes are less serviceable than those of the former. The stomach is an organ that ought in all cases to be *suspected*,—it will be found to be the true though skulking offender in nine cases out of ten.

Boston, March 20, 1832.

M. D.

BOSTON MEDICAL AND SURGICAL JOURNAL.

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VACCINE VESICLE.

THERE is great variety in the size of the vaccine vesicle in different cases, and also in the quantity of limpid virus that may be obtained from it. It is probable that this depends, in a measure at least, on the manner in which the process of inoculation is conducted. An extensive incision, and the introduction of an abundant dose of fresh matter, are usually followed by a large and full vesicle, whilst the eruption produced by a minute opening will generally be small. In Edinburgh, where a vaccinating lancet with a rounded extremity is in common use, we have remarked that the vesicle is of greater dimensions than in other places where the puncture is made by a needle or common bleeding lancet; and we know of no other reason than this for the difference alluded to. It may be also owing, in some degree, to the freshness and the liquid and consequently diffusible state of the matter; for our observations there were made in the Dispensary, where, a certain day in each week being set aside for this business, the virus is transferred *immediately* from the vesicle on one child to the arm of others.

When it is an object to produce an abundance of fresh virus, therefore, as is the case in times of alarm, or of general vaccinations, we should advise that the cuticle be raised over a surface larger than usual, and the matter inserted in a liquid state. If fresh virus is not attainable, a thin paste made with warm water and the scrapings of the concave central portion of a circular crust, will answer equally well.

Dr. Howison, vaccinator to the Edinburgh Dispensary, has recently

advanced the opinion that the true vaccine vesicle is not necessarily circular, as has been supposed, or of any other uniform figure. Its shape depends, so far as his experience has gone, and it has been ample, on the shape of the incision; and, says he, if a scratch were made wholly round the arm, and the matter there deposited, the vesicle would be annular, and still genuine and effectual. So far as extreme cases go, Dr. H. is doubtless correct. We apprehend, however, that there will always be found a strong tendency to the circular figure, and unless drawn from it by extravagant deviations in the bed, the true disease will always be such as we are accustomed to see it on the arm, and to find it described and represented in books.

PUBLIC VACCINE INSTITUTION.

We are happy to announce that a Vaccine Institution is established in this city, where the poor may obtain protection from the smallpox gratuitously, and the faculty, in town and country, an abundant supply of fresh virus, on the same liberal terms.

Various propositions have been made from time to time, with a view to extend this invaluable blessing to the poor, and to ensure a constant renewal of the virus. That which is now adopted by the City Government originated with the Boston Medical Association, which urged the plan on the proper authorities more than a year ago. It is calculated, better than any other, to accomplish the important purposes of such an institution in a vigorous and economical manner; and although at the expense and by direction of this city, its benefits are offered, without fee or reward, to the Practitioners and people of every portion of the Commonwealth. The daily number of applicants for vaccination is already considerable, and the matter taken each day is deposited in a separate phial and labeled, by Dr. Smith, under whose care, as Resident Physician, the conduct of the institution has been placed. Now that the source of virus is abundant, and accessible with so much facility, we would suggest to Town authorities in the various parts of the Commonwealth, the expediency of a general vaccination of all their unprotected inhabitants. That the regulations of the establishment may be generally understood, we give below a copy of a note which has been transmitted by the Mayor to the Physicians practising in Boston.

"**SIR,**—A public Vaccine Institution having been instituted by the City of Boston, for the gratuitous vaccination of all persons who may consider it a privilege to avail themselves of its benefits, you are respectfully solicited to co-operate with the City Government, in directing those who may apply to you for information, to the *Vaccine Office*, in the third story of the City Hall, over the room of the Mayor and Aldermen.

In order to ensure a supply of genuine vaccine matter, during the warm season, it has been found necessary to adopt the following regulations.—

First. The Resident Physician will be in the Office every Monday, from the first day of April to the first of October, from 8 o'clock in the morning till 2 o'clock, P. M.

Secondly. Children and others who are vaccinated at the Office, are earnestly requested to call again on the following Monday after the operation, in order to have it ascertained whether the vaccination has been successful.

Thirdly. Children will be furnished with certificates of having been vaccinated, in order to gain admission into the Public Schools.

Fourthly. Physicians in the City and Country will be supplied with pure vaccine virus, gratuitously, at all times, on application to the Resident Physician.

CHARLES WELLS, Mayor.

Boston, March, 1832."

TREATMENT OF CHOLERA.

LITTLE light has yet been thrown on this interesting topic, in the countries where the cholera has prevailed. Powerful emetics of common salt or mustard, with the stimulus of heat, friction, and cauteries, externally, appear on the whole to constitute the most approved method of attacking the disease. Little, however, can be said in favor of any known treatment, whilst the mortality continues as great as it still is.

In London the mortality has not, so far as our accounts reach, materially varied from that exhibited by the bills of other afflicted places in Great Britain. It broke out in that city on the 12th of February. "*The first case reported to the Council was that of a ship-scraper, who had been employed, on the preceding day, on board a vessel from Sunderland.*" On the 17th of the same month, there had been fifteen other cases in London, and seven deaths by this disease. In Scotland, the ravages of the disease appear to be increasing, and the British Government are active in adoption of every means in their power of checking the destruction of the malady, allaying the popular excitement and alarm, and diffusing widely correct information respecting its character and progress.

A late writer, the latest indeed in England, suggests the same principle of treatment as was proposed by Dr. Hoit in a communication to this Journal, No. 4 of the present volume. He supposes, with Dr. H., that by producing a new and very powerful impression on the system, the disease may probably be overcome. This, he thinks, may be done by the inoculation of some virulent poison, and no one appears to him more promising than the *Rhus toxicodendron*. By introducing this beneath the cuticle, and at the same time administering it internally, a counteraction may be excited which shall take precedence of that which constitutes the cholera.

Most remedies that have been proposed for this disease, since its introduction into Great Britain, have been subsequently tried to a greater or less extent; we hope, therefore, to be able soon to offer the reader some account of the practical application of the principle thus proposed.

We think, with our correspondent CELSUS, that the modes of treatment hitherto described by foreign writers, have been surprisingly deficient in activity and boldness. The practice adopted by Dr. Page in the Spotted Fever, an account of which we have recently given, was much more decisive and powerful than any which has as yet, so far as the profession is apprised, been opposed to the cholera; and yet the exaggerated symptoms of this malady clearly demand a more rather than less active medical treatment. Should it reach our shores, we are confident it would find, in American Physicians, a more formidable foe than it has yet encountered in other countries.

Means adopted in Edinburgh to mitigate the severity of Cholera.—A Board of Health has been formed, comprising the names of many of the most influential gentlemen of the place, and with such a host of talent in its medical department as must command the fullest confidence of the public. Five hospitals have been prepared in different districts of the town for the accommodation of the poor, and we have reason to hope that scientific and well-directed efforts will now be made to put to the test of clinical experience the various methods which have been proposed—particularly galvanism—different kinds of emetics—neutral salts—and others, with regard to which the accounts at present are so contradictory that it is impossible to draw any satisfactory inference. We understand that in Edinburgh six stations have been opened for the supply of provisions to the indigent, and that at present 5800 quarts of good soup, and 6500 rations of bread, are daily distributed. This is, indeed, setting about the thing in the right way, and the northern metropolis has shown an example which we should be glad to see imitated elsewhere.—*London Med. Gaz.*

Further Quarantine Regulations.—By proclamation of the Mayor of this city, a quarantine is laid on all vessels coming from any port in the Island of Great Britain. This measure has been rendered advisable by the continued prevalence of the cholera in that Island, and its probable extension to most if not all its maritime towns.

Gaining Courage.—The Italian practice, which we mentioned some months ago, of curing leucorrhœa by the administration of ergot in doses of five grains a day, has advanced in boldness with great rapidity. Some cases of profuse menorrhagia have recently been reported by Drs. Pignacca and Cabini, in which this medicine was successful in quantities of from ten grains to half a drachm in the twenty-four hours.

Medical School of Kentucky.—The Medical Department of the Transylvania University is in a condition which must be gratifying to every friend of science. There are lectures given during the winter, on Anatomy and Surgery, by Dr. Dudley; on the Institutes and Clinical Practice, by Dr. Caldwell; on the Theory and Practice, by Dr. Cooke; on Obstetrics and the Diseases of women and children, by Dr. Richardson; on Materia Medica, by Dr. Short; and on Chemistry, by Dr. Yandell. The class, the last season, was as follows:—From Kentucky, 62—Tennessee, 41—Georgia, 22—South Carolina, 21—Alabama, 21—Vir-

ginia, 14—Mississippi, 12—North Carolina, 11—Missouri, 2—Indiana, 2—Arkansas Territory, 2—Louisiana, 1—France, 1—Ireland, 1.—Total, 213. The Professors have determined to give full courses, in their respective branches, during the ensuing summer, so that there may be no long interval of Medical Instruction at the University.

Monthly Notice of New Publications.

The Cyclopaedia of Practical Medicine. Edited by JOHN FORBES, M.D. F.R.S., Physician to the Chichester Infirmary, &c.; ALEXANDER TWEEDIE, M.D., Physician to the London Fever Hospital, &c.; and JOHN CONOLLY, M.D., Late Professor of Medicine in the London University, &c. Published in Monthly Parts. Part I. for January, 1832.

We promised last week a more detailed notice of the first number of the *Cyclopaedia of Practical Medicine*, published in London the first of January last, and to be republished at Philadelphia. This No. contains 112 royal octavo pages, and will, we understand, form about a twentieth part of the work. Among the contributors we find the names of Drs. Lee, Elliottson, Marshall Hall, Clark, Conolly, and many others who are favorably known, both as writers and practical men. The present No. contains twenty-one articles, commencing with Abdomen (Exploration of), and ending with Aorta (Aneurism of). Of some of these it is our present purpose to present a brief notice.

ACUPUNCTURE, by Dr. Elliottson. Dr. E. observes that this forms an example of a good remedy introduced into practice upon a groundless hypothesis. The immediate purpose which it is supposed to answer in Japan and China, is to allow of the escape of a subtle and acrid vapor, on the confinement of which various forms of disease are imagined to depend. The remedy was made known in Europe by Koempfer, a Dutch physician, who had witnessed its operation in Japan, as early as the year 1691; but the first European trials of it were made by Dr. Berlioz, in Paris, in 1810. The following extracts on the forms of diseases to which this remedy is adapted, and on the mode of employing it, possess some interest.

"The diseases in which the power of acupuncture is well established are, pain and spasm, not dependent upon inflammation or organic disease, rheumatism of the nerves, (rheumatic neuralgia,) as distinguished from that chronic form which is generally limited to a small extent of nerve, lasts a great length of time, and is independent of cold, the invariable cause of rheumatism. In rheumatism of the fleshy parts, in simple pain of any spot, and in spasmodic and convulsive pain of various parts, whether local or migratory, acupuncture is decidedly beneficial, provided inflammation be not the cause."

"The operation may be performed in muscular, aponeurotic, and tendinous parts; and the needle introduced to the depth of from the fourth of an inch to two inches, according to the thickness of the muscles. We

should not advise it to be passed into viscera, articulations, or blood-vessels. In general no fluid escapes when the needle is removed ; but now and then a small drop of blood follows ; and in one case which came under our own observation, when the needle had been introduced into the pectoral muscle, blood spirted forth, but it was immediately restrained by gentle pressure—an occurrence in every respect similar to what once happened in the practice of M. Bretonneau."

Some experiments performed on animals by the individual last named, go to show that the stimulus of acupuncture applied to the heart is capable of exciting it to renewed action in cases where animation has been suspended from asphyxia. Supposing these experiments to be accurately reported, however, they throw little light on the effect of the operation when employed for the cure of rheumatic affections. In the former case a stimulus is applied to a peculiarly irritable muscle, producing at first a spasmodic action, and subsequently a renewal of its ordinary functions. In the latter, the effect, so far as can be judged, seems to be directly sedative, causing parts previously possessed of exquisite sensibility, to pass at once into the opposite state. The *modus operandi*, however, of the operation is peculiarly obscure ; and the difficulty of assigning any rational explanation, or rather the absence of anything analogous in the operation of other remedies, has led some to express an unwarrantable scepticism in regard to the facts. In regard to the different explanations which have been resorted to, Dr. E. expresses himself in the following terms.

"It is not accounted for by fear or confidence ; since those who care nothing about being acupunctured, and those who smile at their medical attendant for proposing such a remedy, derive the same benefit, if their case is suitable, as those who are alarmed and those who submit to it with faith. Neither is it explained on the principle of counter-irritation ; since the same relief is experienced whether pain be occasioned by the insertion of the needle or not. Galvanism, likewise, fails to explain it ; because, although the needle frequently becomes oxidated, and affords galvanic phenomena while in the body, these phenomena bear no proportion to the relief afforded by the operation ; besides that they are observed when acupuncture is practised upon a healthy person, and do not take place when needles of gold or silver are employed, which, however, are equally efficacious with needles of steel."

AGE. This article, of about nine pages, is an interesting and highly finished treatise on the moral and physical changes which take place in advanced life. The author, Dr. Roget, is mentioned as Secretary to the Royal Society. The whole of this monograph marks a vigorous intellect, and philosophic habits of thought and reasoning. The insidious approaches of age, its effects on the osseous system, on the fluid secretions, on the skin and hair, on the organs of sight and hearing, on the circulation, on the absorbent system, on the muscles, on the brain and nerves, on the sensibility and temperature, and on the mental faculties, are all described in clear, forcible, and animated language. The specific dis-

eases of old age are then considered, particularly the climacteric disease as described by Sir Henry Hallford ; dyspepsia with its various aggravations ; failure of the urinary functions, palsy and apoplexy. The following passage on the dyspepsia of old age, describes a train of phenomena, which no one whose attention has been called to this subject can fail to have noticed.

"Dyspepsia, in all its varieties, is among the earliest as well as most common of the diseases of advanced life ; and its prevalence at this period may be traced to many causes, of which the operation is sufficiently obvious. The principal of these is, undoubtedly, the gradual decline of irritability and of muscular power which pervades the whole system, and in which the fibres of the stomach and intestines must of course participate. It often happens, that while the powers of assimilation have diminished, the appetite still continues good ; and, consequently, more food is taken than can be converted into healthy nutriment. That portion which is imperfectly digested being retained, tends, by its presence and accumulation, still further to impede the due performance of this function. The distention of the stomach and bowels from flatus, and their continued irritation from containing acid or acrid materials, lay the foundation of a vitiated habit, and of permanent injury to the tone of the organs. Another cause of imperfect digestion may be pointed out in the loss of the teeth, and the consequent defective mastication of the food. The mischief is often aggravated by the sudden discontinuance of the salutary exercise which was formerly taken ; and by an indulgence in the repose which, after a life of exertion, is almost claimed as the privilege of age."

This disposition of the appetite to survive the digestive powers is among the embarrassing circumstances by which the practitioner is met in his attempts to enforce a due regulation of the diet in patients of this class. The desire for solid food often continues unabated, although the articles taken into the stomach are found, after causing inconvenience and distress through the whole canal, to pass from the rectum undigested and unchanged. To what, it may be asked, is it owing that a correspondence which exists at every other period of life between the powers of the stomach, in health, and its demand, is in old age no longer maintained ; and why does not the same instinct which leads the infant to seek the mother's milk as its natural and appropriate nutriment, direct the old man to the choice of an aliment equally adapted to his impaired powers ? The effect of luxurious habits, in accelerating the infirmities of age, and impairing the powers of the system, must doubtless be resorted to for the explanation of this apparent anomaly. Were all our habits through life conformed as much as those of infancy to the design and intention of nature, we might then with better reason hope in age, as in youth, that her obvious dictates would furnish us an unerring and ample guide. But appetite, like conscience, when it has too often been tampered with, will learn, from ill treatment, the lesson of ill faith ; and thus the excesses of youth become too surely the whips and scourges of declining age.

ALTERATIVES. An article on this subject, by Dr. Conolly, contains an enumeration of most of the articles which are commonly viewed in this light. We refer to it now, however, for the sake of a single remark, which has often occurred to ourselves, and which suggests a course of inquiry, destined, as we hope, at no distant period, to be pursued by the profession. Speaking of the medicinal virtues of guaiacum, Dr. C. observes,—

“We have ourselves little to say of its efficacy when used alone; and we so often remark, when doubt has been once cast on the operation of a medicine, and the effect is carefully looked for, that it fails to be observed, as much to wish that not only the guaiacum, but many or most of the articles in the *Materia Medica*, were submitted to new and careful clinical experiments. No part of medicine is in more need of complete reform than that which relates to the actual effect of medicines daily and hourly employed.”

We conclude by again directing the attention of our readers to the plan of this work, which will, we think, form a condensed library of practical medicine in a convenient form and at a reasonable price. The future numbers may be noticed as they appear.

A Treatise on Dislocations and Fractures of the Joints. By Sir ASTLEY COOPER, Bart., F.R.S., Sergeant-Surgeon to the King, &c. &c. Boston. pp. 516.

A NEW American, from the sixth London Edition of this valuable classic, is just from the press of Lilly & Wait of this city. The English edition, of which this is a reprint, contains several important additions, by the illustrious author; and the different and especially most obscure species of fracture and dislocation, with the modes of reducing them, are illustrated by 34 very full and satisfactory copperplate engravings. All these additions and plates are given in the present volume, together with Dr. Godman's notes and references. Indeed, so perfect a work is here presented to the American practitioner, that the possession of it will be scarcely less a comfort to him, than it were to live within call of Sir Astley himself.

The Library of Entertaining Knowledge, published under the direction of the Society for the Diffusion of Useful Knowledge. Lilly & Wait. Boston. 1831.

THE winter is past, but the evenings are yet long, and we do the reader a favor when we call his attention to the work that bears the above title. It is not saying too much of these books, to rank their possession and use among the means every family should adopt to attain that greatest of all safeguards to the morals of its younger members,—an agreeable home. The mind of the young must be entertained. If a parent does not know this fact and act upon it, there are but slender hopes for the

prosperity or happiness of his children. The mind of the young will be entertained. If this entertainment is not found at home, it will be sought abroad; and this is the first step to the ruin of a young man. It is the great happiness of the present age that it abounds in sources of attractive and innocent amusement that may be introduced into the family circle. Most of these have the additional advantage of conveying instruction in agreeable modes; and of all which offer to the young, at the same time, both entertainment and knowledge, we know of none better suited to this object than that which we are now particularly noticing: its text is in perfect keeping with its title, and fully sustains the expectations to which that must naturally give rise.

Eleven volumes have been published, chiefly on subjects of natural and political history, biography, mechanics, &c. all very fully and handsomely illustrated by numerous cuts. We would refer, as particularly interesting, to the volumes on insect architecture, and the architecture of birds; but as it is our intention, in future numbers, to make the reader better acquainted with the work, especially that part of it which relates to natural history, we shall content ourselves at present with this general notice.

Whole number of deaths in Boston for the week ending March 24, 30. Males, 14—Females, 16.

Of consumption, 3—burn, 2—dropsy on the brain, 2—convulsions, 3—scarlet fever, 5—scalded, 1—typhous fever, 1—hooping cough, 1—old age, 1—suffocated, 1—worms, 1—dropsy, 2—suicide, 1—mortification, 1—lung fever, 1—inflammation on the lungs, 1—unknown, 3.

ADVERTISEMENTS.

HISTORY OF THE CHOLERA MORBUS.

Just published by CARTER & HENDEE, a Medical and Topographical History of the Cholera Morbus, including the mode of Prevention and Treatment, by SCOTTETTER, adjunct Professor at the School of Medicine at Strasburg, member of the Royal Academy at Metz, &c. &c., with a Report read at the Royal Academy of Medicine at Paris, Sept. 17, 1831. Translated from the French, by A. SIDSEY DOANE, A.M., M.D. March 14.

REPORT OF THE ROYAL ACADEMY OF MEDICINE to the Minister of the Interior, upon the Cholera Morbus, published by order of the French Government. Translated from the French by JOHN W. STERLING, M.D. Just received by CARTER & HENDEE. March 14.

A DICTIONARY OF MEDICINE, designed for popular use. By Alexander Macaulay, M.D. Second English edition. Just received by CARTER & HENDEE. March 14.

A Treatise on the Structure, Functions, and Diseases of the Human Sympathetic Nerve. Illustrated with Plates. By John Fred. Solstein. Translated, from the Latin, with Notes, by Joseph Pancoast, M.D. Just received by CARTER & HENDEE. March 14.

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